Check the box next to the <u>best</u> description of your cause of action. Choose only one:	
Prisoner Civil Rights	
Non-Prisoner Civil Rights	
Personal Injury/Tort	
Tax Collection Practices	FILED
Employment Discrimination	ITLEU
Other (specify)	MAY 1 7 2013
IN THE UNITED STATES	District Of Montana
FOR THE DISTRICT	OF MONTANA Billings
Yellowstone Billi (You must fill in this blank. See In	DIVISION ustruction 6.)
Clafford W. Eggle	Cause No. CV - 13 - 70 - Blg - SEt
	(to be filled in by Clerk of Court)
(Full name of Plaintiff and prisoner number, if any)	(to be fined in by clerk of court)
Plaintiffs,	
	COMPLAINT
vs.	
	Jury Trial Demanded
	T milar in
	Jury Irial Not Demanded
(Full name of each defendant. Do not use et. al.)	
Defendants.	
	1
INSTRUCTIO	<u>DNS</u>
 Use this form to file a civil complaint with the Uni Montana. You may attach additional pages where 	ted States District Court for the District of necessary.
2. Your complaint must include only counts/causes of citations.	f action and facts - not legal arguments or
Plaintiff's Last Name	Complaint (Revised 5/09) Page 1 of 7

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- 3. Your complaint must be typed or legibly handwritten. All pleadings and other papers submitted for filing must be on 8 ½" x 11" paper (letter size). Each plaintiff must sign the complaint (see page 7). The signatures need not be notarized. However, each signature must be an original and not a copy. You must pay the Clerk for copies of your complaint or other court records, even if you are proceeding in forma pauperis. The cost for copies is \$0.50 per page and prepayment is required.
- 4. The filing fee for a complaint is \$350.00. The filing fee is set by Congress and cannot be changed by the Court. In addition, you will be required to pay the cost of serving the complaint on each of the defendants. If you are unable to prepay the entire filing fee and service costs for this action, you may move to proceed in forma pauperis. Your complaint will be returned to you without filing if it is not accompanied by either the full filing fee or a motion to proceed in forma pauperis. Please note that prisoners proceeding in forma pauperis are required to pay the full filing fee in installments.
- 5. Complaints submitted by persons proceeding in forma pauperis and complaints submitted by prisoners suing a governmental entity or employee are reviewed by the Court before the defendants are required to answer. See 28 U.S.C. §§ 1915(e)(2), 1915A(a); 42 U.S.C. § 1997e(c). After the Court completes the review process, you will receive an Order explaining the findings and any further action you may or must take. The review process may take a few months; each case receives the judge's individual attention.
- 6. Pursuant to Standing Order DWM 27, "no prisoner may maintain more than two (2) civil actions in forma pauperis at one time, unless the prisoner shows that he or she is under imminent danger of serious physical injury."
- 7. The case caption (page 1 of this form) must indicate the proper Division for filing. A Division where the alleged wrong(s) occurred is a proper Division. When you have completed your complaint, mail the *original* of your complaint and either the full filing fee or your motion to proceed in forma pauperis to the proper Division:

Billings Division: Clerk of U.S. District Court, 316 N. 26th, Room 5405, Billings, MT 59101 (Big Horn, Carbon, Carter, Custer, Dawson, Fallon, Garfield, Golden Valley, McCone, Musselshell, Park, Petroleum, Powder River, Prairie, Richland, Rosebud, Stillwater, Sweetgrass, Treasure, Wheatland, Wibaux or

Yellowstone County)

Butte Division: Clerk of U.S. District Court, 400 N. Main St., Federal Bldg. Rm. 303, Butte,

MT 59701

(Beaverhead, Deer Lodge, Gallatin, Madison, or Silver Bow County)

Plaintiff's Last Name

Complaint (Revised 5/09)
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Great Falls Division:	Clerk of the U.S. Di 59404.	istrict Court, 12	25 Central Ave. We	est, Great Fal	lls, MT
	(Blaine, Cascade, Chouteau, Daniels, Fergus, Glacier, Hill, Judith Basin, Liberty, Phillips, Pondera, Roosevelt, Sheridan, Teton, Toole, or Valley County)				
	Crossroads Correc	tional Center	is located in Toole	County	
Helena Division:	Clerk of U.S. Distric (Broadwater, Jeffers Montana State Pris	on, Lewis & C	lark, Meagher, or I	Helena, MT Powell Coun	59626 ty)
Missoula Division:	Clerk of the U.S. Dis Missoula, MT 59807 (Flathead, Granite, L County)	7			
COMPLAINT					
	I. PLACE (OF CONFIN	EMENT		
A. Are you incarce	rated? Yes		No □ (if No,	go to Part	II)
B. If yes, where are Haskell Cod	you currently incurrently incurrently Determined	earcerated?	rigler.C)K.74	-462
C. If any of the inci	idents giving rise	to your comp	plaint occurred i	n a differe	nt
facility, list that	racinty: 3 : 3/orence	, Co. +,	Lucson Le	~·	
II. EXH	AUSTION OF A	DMINISTE	RATIVE REMI	EDIES	
A. Non-Prisoners				·.	
1. Does any cau administrative	se of action allege e remedies before	d in this con filing in cou	nplaint require y rt? Yes □ No Ŋ	ou to exha (Don't K	iust now 🗷
2. If yes, have ye	ou exhausted your	administrat	ive remedies? Y	es □	No □
laintiff's Last Name _(Eaglo		Сотр	laint (Revise Page	ed 5/09) 3 of 7

B. Prisoners (If you listed other institutions in I.C above, please answer for each institution).	
1. Is there a grievance procedure in your current institution? Yes □ No □	
2. Did you fully exhaust the administrative grievance process within the jail or prison where the incidents at issue occurred? Yes □ No □	
3. If you did not fully exhaust the grievance process, explain why:	·
III. PARTIES TO CURRENT LAWSUIT	
A. Plaintiff A. Plaintiff A. Plaintiff (1) Alona,	
presently residing at 2416 5. W. 30th Str. (State)	
(Mailing address or place of confinement)	
B. Defendant Richard F Cebull is a citizen of Montana,	
employed as Chief Judge U.S. District James F. Battim U.S. Ferrord Count (Position and Title, if any) and (Institution/Organization)	House
Defendant Marcio Hurd is a citizen of Montone,	·
employed as ASS US ROSCUTOR at James F. Bartin US, todate (O) (Position and Title, if any) (Institution/Organization)	stellous.
Defendant Steven Babcock is a citizen of Montane,	
employed as Foderal Defendant US, Foderal Defendant (State) (Position and Title, if any) (Institution/Organization) Bruns	ntons Bivisik
(NOTE: If more space is needed to furnish the above information, continue on a blank sheet labeled "APPENDIX A: PARTIES").	
Plaintiff's Last Name Complaint (Revised 5/09) Page 4 of 7	

IV. STATEMENT OF CLAIMS

	5 (J.S.C. \(\frac{3}{2}\)?	55 Invalid	onstitutional rights been v	
Date of incident(s	* Tudamen	tenfereda	n January 16,	2004
Supporting names of p	Facts: (Include all ersons involved, pl	l facts you consid aces, and dates. S	er important, including State the facts clearly, cases, or statutes).	g
ciaim and s	pecifically describe	e what cach defen	idant aid of aid not a) 10
	Ling Mude 1	chiel U.S. in Westeen ing - Maire	Judge del no	labide Haraca Labide
allegedly can he purchased of CLAIMS." You facts (following the case)	ause your injury). F Cebull F Cebull Ling Muse in Ling	Chief U.S. n Westeen ing -Maire ge Mollovia Chief U.S. n Westeen and -Maire ge Mollovia chire Cou clank sheet labeled agraphs for each cou	Judge did no Mt lay al. S. Ju in Itural Ass Ruling but shi sck Fooleral 1	Habide HARCECT Detenden MENT porting

V. INJURY

Describe the injuries you suffered as a result actions. (Do no cite legal arguments, cases, of the RESONNOL INJURIES - U.S. 1. BRAKEN NOISO - TECH KO RUPLES +0 SUROPRIM IN 2001 WHERE MENTED SUROPRIM IN 2001 WHERE MENTED ANGLES PHYSICAL ANGLES	
U.S. P. Jucson M. S. P. Jucson M. S. P. Jucson (NOTE: If more space is needed to furnish the above information of the special	her on a blank sheet labeled
VI. REQUEST FO	R RELIEF
Describe the relief you request. (Do no cite le la Control de la Control	egal arguments, cases, or statutes). HIL HIM I WAS MENTAL & PHYSICAL HILL ASSAULTE AND MILLEN TOO MURRES
(NOTE: If more space is needed to furnish the above info	rmation, continue on a blank sheet labeled
Plaintiff's Last Name	Complaint (Revised 5/09) Page 6 of 7

VII. PLAINTIFF'S DECLARATION

- A. I understand I must keep the Court informed of my current mailing address and my failure to do so may result in dismissal of this Complaint without notice to me.
- B. I understand the Federal Rules of Civil Procedure <u>prohibit</u> litigants filing civil complaints from using certain information in documents submitted to the Court. In order to comply with these rules, I understand that:
 - social security numbers, taxpayer identification numbers, and financial account numbers must include only the last four digits (e.g. xxx-xx-5271, xx-xxx5271, xxxxxxxx3567);
 - birth dates must include the year of birth only (e.g. xx/xx/2001); and
 - names of persons under the age of 18 must include initials only (e.g. L.K.).

If my documents (including exhibits) contain any of the above listed information, I understand it is my responsibility to black that information out before sending those documents to the Court.

I understand I am responsible for protecting the privacy of this information.

- C. I declare under penalty of perjury that I am the plaintiff in this action, I have read this complaint, and the information I set forth herein is true and correct. 28 U.S.C. § 1746; 18 U.S.C. § 1621.
- D. (Prisoners Only) This Complaint was deposited in the prison system for legal mail, postage prepaid or paid by the prison, on

		, 20
Executed at	on	, 20
_	(Da ature of Plaintiff	ich
(If there is more than one Plaintiff,	each Plaintiff must sign the o page).	complaint using a separate declarati
Plaintiff's Last Name _	<u> </u>	Complaint (Revised 5/09) Page 7 of 7